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PTO/SB/01 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	GAMBRO-256
	First Named Inventor	Raymond A. Edgson
	COMPLETE IF KNOWN	
	Application Number	Not Yet Assigned
	Filing Date	
	Group Art Unit	N/A
	Examiner Name	Not Yet Assigned

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR STERILISING A HEAT SENSITIVE FLUID

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application No.

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
9901165-2	SE	03/30/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9903331-8	SE	09/16/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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DECLARATION — Utility or Design Patent Application

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 000530

Direct all correspondence to:	<input checked="checked" type="checkbox"/> Customer Number or Bar Code Label	 000530	OR <input type="checkbox"/> Correspondence address below
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Name

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

Raymond Anthony

Family Name
or Surname

Edgson

Inventor's
Signature

Date

Residence: City
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Country
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Citizenship
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State

ZIP

Country

United Kingdom

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

Michael John

Family Name
or Surname

Dunkley

Inventor's
Signature

Date

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☒

Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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PTO/SB/02A (11-00)
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1
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Name of Additional Joint Inventor, if any: _____				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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City _____		State _____		Country United Kingdom	
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City _____		State _____		Country United Kingdom	
Name of Additional Joint Inventor, if any: _____				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Eric			Family Name or Surname Wilkinson		
Inventor's Signature _____				Date _____	
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City _____		State _____		Country United Kingdom	
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City Cambridgeshire		State _____		Country United Kingdom	
City _____		State _____		Country United Kingdom	
Name of Additional Joint Inventor, if any: _____				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) _____			Family Name or Surname _____		
Inventor's Signature _____				Date _____	
Residence: City _____		State _____		Country _____	
City _____		State _____		Country _____	
Mailing Address: _____					
City _____		State _____		Country _____	
City _____		State _____		Country _____	
Name of Additional Joint Inventor, if any: _____				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) _____			Family Name or Surname _____		
Inventor's Signature _____				Date _____	
Residence: City _____		State _____		Country _____	
City _____		State _____		Country _____	
Mailing Address: _____					
City _____		State _____		Country _____	
City _____		State _____		Country _____	